

STATE OF WEST VIRGINIA
 MINOR PARTY OR INDEPENDENT CANDIDATE NOMINATION PETITION
 for the _____ Municipal General Election

State of West Virginia, Municipality of _____

This is to certify that we, the undersigned, are registered voters of _____ County, who reside within
 _____ Municipality, and within the jurisdiction of the office each candidate named below is seeking.

Name:

Residence:

Party:

Office:

By completing this form the above named candidates are stating that they are legally qualified to hold such office.

Signature	Name (Print)	Birth Date	Street Address	County Use	
				VLD	INV
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					